

FILED  
03 JUL 28 PM 1:05  
RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA  
E-filing

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

PJH

UNITED STATES DISTRICT COURT

Plaintiff,

vs.

PETER CARBONAL

Defendant.

CV 08

CASE NO.

2961

PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS

(PR)

I, PETER CARBONAL, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ☒ No ☐

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \$13 Net: \$18.20

Employer: KERN VALLEY STATE PRISON

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)  
 4 \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

9 a. Business, Profession or Yes \_\_\_ No ☒  
 10 self employment

11 b. Income from stocks, bonds, Yes \_\_\_ No ☒  
 12 or royalties?

13 c. Rent payments? Yes \_\_\_ No ☒

14 d. Pensions, annuities, or Yes \_\_\_ No ☒  
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes \_\_\_ No ☒  
 17 Social Security or other govern-  
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.  
 21 \_\_\_\_\_  
 22 \_\_\_\_\_

23 3. Are you married? Yes \_\_\_ No ☒

24 Spouse's Full Name: \_\_\_\_\_

25 Spouse's Place of Employment: \_\_\_\_\_

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ \_\_\_\_\_ Net \$ \_\_\_\_\_

28 4. a. List amount you contribute to your spouse's support: \$ \_\_\_\_\_

- b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

NONE

5. Do you own or are you buying a home? Yes \_\_\_ No ☒

Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

6. Do you own an automobile? Yes \_\_\_ No ☒

Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Is it financed? Yes \_\_\_ No ☒ If so, Total due: \$ \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

7. Do you have a bank account? Yes \_\_\_ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: \_\_\_\_\_

Present balance(s): \$ \_\_\_\_\_

Do you own any cash? Yes \_\_\_ No ☒ Amount: \$ \_\_\_\_\_

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes \_\_\_ No ☒

8. What are your monthly expenses?

Rent: \$ NA Utilities: NA

Food: \$ NA Clothing: NA

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>THE STATE</u>	\$ <u>818.20</u>	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

1 9. Do you have any other debts? (List current obligations, indicating amounts and to  
2 whom they are payable. Do not include account numbers.)

3 "N/A"  
4

5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes \_\_\_ No ✓

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.

9  
10  
11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15  
16  
17 DATE

SIGNATURE OF APPLICANT  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

Case Number: CV08-2961

CERTIFICATE OF FUNDS  
IN  
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Cantajal, P 22467 for the last six months at

[prisoner name]

Kern Valley State Prison where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 8.76 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 2.14.

Dated: 7/17/08

T. Druggs, Asst. Juch

[Authorized officer of the institution]

REPORT ID: TS3030 .701

REPORT DATE: 07/15/08

PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS  
KERN VALLEY STATE PRISON  
INMATE TRUST ACCOUNTING SYSTEM  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2008 THRU JUL. 15, 2008

ACCOUNT NUMBER : P22467                      BED/CELL NUMBER: FDB300000000204U  
ACCOUNT NAME : CARBAJAL, PETER              ACCOUNT TYPE: I  
PRIVILEGE GROUP: A

## TRUST ACCOUNT ACTIVITY

## TRAN

DATE	CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
01/01/2008		BEGINNING BALANCE					0.00
01/07*VD54		INMATE PAYROL 1020DEC146			11.07		11.07
01/14 FC04		DRAW-FAC 4 1065/FD3D				5.80	5.27
02/06*VD54		INMATE PAYROL 1209JAN124			8.75		14.02
02/19 FC04		DRAW-FAC 4 1280/FD3D				14.02	0.00
03/06*VD54		INMATE PAYROL 1404FEB152			7.61		7.61
04/15 FC04		DRAW-FAC 4 1654/FD3D				7.61	0.00
05/06*VD54		INMATE PAYROL 1782APR205			8.38		8.38
05/06*VD54		INMATE PAYROL 1787MAR264			8.38		16.76
05/12 W536		COPAY CHARGE 1815/MD				5.00	11.76
05/19 FC04		DRAW-FAC 4 1873/FD3D				11.76	0.00
06/05*VD54		INMATE PAYROL 1970MAY155			8.38		8.38
06/05 W516		LEGAL COPY CH 1972/LCOPY				2.00	6.38
06/09 FC04		DRAW-FAC 4 1982/FD123				6.38	0.00

## \* RESTITUTION ACCOUNT ACTIVITY

DATE SENTENCED: 12/17/98                      CASE NUMBER: \*SS980785  
COUNTY CODE: \*MON                      FINE AMOUNT: \$ 500.00

DATE	TRANS.	DESCRIPTION	TRANS. AMT.	BALANCE
01/01/2008		BEGINNING BALANCE		442.05
01/07/08	VR54	RESTITUTION DEDUCTION-SUPPORT	12.28-	429.77
02/06/08	VR54	RESTITUTION DEDUCTION-SUPPORT	9.72-	420.05
03/06/08	VR54	RESTITUTION DEDUCTION-SUPPORT	8.45-	411.60
05/06/08	VR54	RESTITUTION DEDUCTION-SUPPORT	9.29-	402.31
05/06/08	VR54	RESTITUTION DEDUCTION-SUPPORT	9.29-	393.02
06/05/08	VR54	RESTITUTION DEDUCTION-SUPPORT	9.29-	383.73



THE WITHIN INSTRUMENT IS A  
CORRECT COPY OF THE TRUST  
ACCOUNT MAINTAINED BY THIS OFFICE.  
ATTEST:

CALIFORNIA DEPARTMENT OF  
CORRECTIONS AND REHABILITATION

BY [Signature]  
TRUST OFFICE

*Original  
12-29-07*

REPORT ID: TS3030 .701

REPORT DATE: 07/15/08

PAGE NO: 2

KERN VALLEY STATE PRISON  
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2008 THRU JUL. 15, 2008

ACCT: P22467 ACCT NAME: CARBAJAL, PETER ACCT TYPE: I

\* THIS STATEMENT DOES NOT REFLECT THE ADMINISTRATIVE FEE CHARGE THAT \*

\* IS EQUAL TO TEN PERCENT OF THE RESTITUTION AMOUNT COLLECTED. \*

## TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	52.57	52.57	0.00	0.00	0.00

CURRENT  
AVAILABLE  
BALANCE

0.00

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ACCOUNT MAINTAINED BY THIS OFFICE.  
ATTEST:



CALIFORNIA DEPARTMENT OF  
CORRECTIONS AND REHABILITATION

BY   
TRUST OFFICE



Kern Valley State Prison  
Building 3

LETTER  
Kern Valley State Prison  
D. B. G.  
Bakersfield  
JUL 25 8 34 PM '08



Northrup District of C  
45c  
San Francisco Ca. 94



**GAL MAIL**

Alley State Prison  
City D, Building 3

Northern District of California  
USC Courthouse  
San Francisco Ca. 94102

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**KVSP LEGAL MAIL**

**KVSP LEGAL MAIL**

**KVSP LEGAL MAIL**

**KVSP LEGAL MAIL**

7-22-08

DD I. Hebert CFI

